

# NOTIFICATION OF MULTICANDIDATE STATUS

(See reverse side for instructions)  
This form should be filed after the Committee qualifies as a multicandidate committee.

1. (a) NAME OF COMMITTEE IN FULL Yolo County Republican Central Committee (Fed Acct.)		2. FEC IDENTIFICATION NUMBER C00385799
(b) Number and Street Address 3065 Hawaii Court		
(c) City, State and ZIP Code West Sacramento CA 95691		3. TYPE OF COMMITTEE (check one) <input type="checkbox"/> STATE PARTY <input checked="" type="checkbox"/> OTHER

I certify that **one** of the following situations is correct (complete line 4 *or* 5):

4. **STATUS BY AFFILIATION:** The committee submitted its Statement of Organization (FEC FORM 1) on 03/20/2003 and simultaneously qualified as a multicandidate committee through its affiliation with:  
Committee Name: California Republican Party  
FEC Identification Number: C00140590.

5. **STATUS BY QUALIFICATION:**

(a) **Candidates:** The committee has made contributions to the five (5) federal candidates listed below (ONLY State party committees may leave this blank.):

	Name	Office Sought	State/District	Date
(i)				
(ii)				
(iii)				
(iv)				
(v)				

(b) **Contributors:** The committee received a contribution from its 51st contributor on:\_\_\_\_\_.

(c) **Registration:** The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: \_\_\_\_\_.

(d) **Qualification:** The committee met the above requirements on: \_\_\_\_\_.

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.		
TYPE OR PRINT NAME OF TREASURER John Fronefield	SIGNATURE OF TREASURER John Fronefield [Electronically Filed]	DATE 04/15/2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.